

TRANSMITTAL FORM

(To be used for all correspondence
after initial filing)

Application Number	10/795,797
Filing Date	March 8, 2004
First Named Inventor	Charles L. Gray, Jr.
Art Unit	3745
Examiner Name	Igor Kershteyn
Attorney Docket No.	310121.415

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Request for Corrected Filing Receipt	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address	<input checked="" type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Declaration	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input checked="" type="checkbox"/> Information Disclosure Statement and Transmittal	<input type="checkbox"/> Statement under 37 CFR 3.73(b)	_____
<input checked="" type="checkbox"/> Cited Reference	<input type="checkbox"/> Terminal Disclaimer	_____
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	_____
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> CD, Number of CD(s) _____	_____
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	_____

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Seed Intellectual Property Law Group PLLC	Customer Number	34212
Signature			
Printed Name	Lorraine Linford		
Date	June 2, 2006	Reg. No.	35,939

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature			
Typed or printed name	Andrea Dolder	Date:	June 2, 2006



PATENT

I hereby certify that on the date specified below, this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

6/2/06
Date

Andrea Dolder
Andrea Dolder

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Charles L. Gray, Jr.
Application No. : 10/795,797
Filed : March 8, 2004
For : EFFICIENT PUMP/MOTOR WITH REDUCED ENERGY LOSS

Examiner : Igor Kershteyn
Art Unit : 3745
Docket No. : 310121.415
Date : June 2, 2006

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT TRANSMITTAL

Commissioner for Patents:

In accordance with 37 CFR 1.56 and 1.97 through 1.98, applicant wishes to make known to the U.S. Patent and Trademark Office the reference set forth on the attached Supplemental Information Disclosure Statement, a copy of which is enclosed. As to any reference cited, applicant does not admit that it is "prior art" under 35 U.S.C. §§ 102 or 103, and specifically reserves the right to traverse or antedate any such reference, as by a showing under 37 CFR 1.131 or other method. Although the aforesaid reference is made known to the Patent and Trademark Office in compliance with applicant's duty to disclose all information he is aware

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of which is believed relevant to the examination of the above-identified application, applicant believes that his invention is patentable.

Please acknowledge receipt of this Supplemental Information Disclosure Statement and kindly make the cited reference of record in the above-identified application.

A fee of \$180 is submitted in accordance with 37 CFR 1.97(c). The Director is authorized to charge any other fees which may be required, or credit any overpayment to Deposit Account No. 19-1090.

Respectfully submitted,

Seed Intellectual Property Law Group PLLC



Lorraine Linford

Registration No. 35,939

Enclosures:

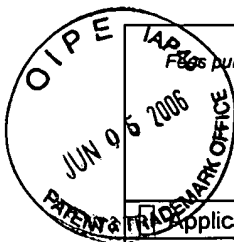
Check

Supplemental Information Disclosure Statement

Cited Reference

701 Fifth Avenue, Suite 6300
Seattle, Washington 98104-7092
Phone: (206) 622-4900
Fax: (206) 682-6031

790128_1.DOC



Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2006

Complete if Known

Application Number	10/795,797
Filing Date	March 8, 2004
First Named Inventor	Charles L. Gray, Jr.
Examiner Name	Igor Kershteyn
Art Unit	3745
Attorney Docket No.	310121.415

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 180

METHOD OF PAYMENT (check all that apply)

- ☒ Check ☐ Credit Card ☐ Money Order ☐ Other (please identify): _____
- ☒ Deposit Account Deposit Account Number: 19-1090 Deposit Account Name: Seed IP Law Group PLLC
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
- ☐ Charge any additional fee(s) or underpayments ☒ Charge any underpayments or credit any overpayments of fee(s) under 37 CFR 1.16 and 1.17

Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
_____ -20 or HP = _____	X	_____ = _____	_____	Fee (\$)
HP = highest number of total claims paid for, if greater than 20.				Fee Paid (\$)

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
_____ -3 or HP = _____	X	_____ = _____	_____

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)) the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

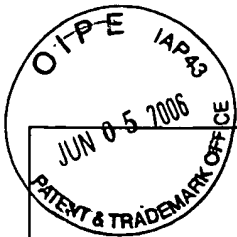
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____ -100 = _____	/50 = _____	(round up to a whole number) x _____	_____	_____

4. OTHER FEE(S)

	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	_____
Other (e.g., late filing surcharge): Submission of Information Disclosure Statement	180

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	35,939	Telephone	206-622-4900
Name (Print/Type)	Lorraine Linford	Date	June 2, 2006		

U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE

ATTY. DOCKET NO.

310121.415

APPLICATION NO.

10/795,797

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

(Use several sheets if necessary)

APPLICANT

Charles L. Gray, Jr.

FILING DATE

March 8, 2004

GROUP ART UNIT

3745

U.S. PATENT DOCUMENTS

*EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE
	AA						
	AB						
	AC						
	AD						
	AE						
	AF						
	AG						
	AH						
	AI						
	AJ						

FOREIGN PATENT DOCUMENTS

		DOCUMENT NUMBER	DATE	COUNTRY	TRANSLATION	
					YES	NO
	AK	FR 2.067.811	08/20/71	France	X	
	AL					
	AM					
	AN					
	AO					

OTHER PRIOR ART *(Including Author, Title, Date, Pertinent Pages, Etc.)*

	AP		
	AQ		
	AR		

EXAMINER

DATE CONSIDERED

* EXAMINER: Initial if reference considered, whether or not criteria is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant(s).